

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

ADDRESS (number and street)

2600 SOUTH DOUGLAS ROAD, STE 900

Check if different
than previously
reported. (ACC)

CORAL GABLES

FL

33134

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00622159

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

C

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

C

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

RIESCO, JOSE, , ,

Type or Print Name of Treasurer

Signature of Treasurer

RIESCO, JOSE, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016 | | 0.00 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 0.00 | |
| (c) Total Receipts (from Line 19) | 52933.00 | 52933.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 52933.00 | 52933.00 |
| 7. Total Disbursements (from Line 31) | 15444.21 | 15444.21 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 37488.79 | 37488.79 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 1 | | 2 | 0 | 1 | 6 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 3 | 0 | | 2 | 0 | 1 | 6 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 41450.00 | 41450.00 |
| (ii) Unitemized | 8983.00 | 8983.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 50433.00 | 50433.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 2500.00 | 2500.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 52933.00 | 52933.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 52933.00 | 52933.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 52933.00 | 52933.00 |

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 10704.41 | 10704.41 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 10704.41 | 10704.41 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 4739.80 | 4739.80 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 15444.21 | 15444.21 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 15444.21 | 15444.21 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 52933.00 | 52933.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 52933.00 | 52933.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 10704.41 | 10704.41 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36)▶ | 10704.41 | 10704.41 |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 23

(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ARFARAS, NICK, , ,

Mailing Address 2854 NE 28TH ST

City
FORT LAUDERDALEState
FLZip Code
33306FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NBROccupation (for Individual)
RADIOLOGY

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 05 | / | 2016 |

Transaction ID : SA11AI.4450

Amount of Each Receipt this Period

500.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BENUA, KATHLEEN, , ,

Mailing Address 505 E HURON ST. #803

City
ANN ARBORState
MIZip Code
48104FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
INVESTOR

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 20 | / | 2016 |

Transaction ID : SA11AI.4429

Amount of Each Receipt this Period

250.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BONNOUGH, MICHAEL, , ,

Mailing Address 6847 REFLECTIONS DR

City
MAUMEEState
OHZip Code
43537FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 22 | / | 2016 |

Transaction ID : SA11AI.4140

Amount of Each Receipt this Period

500.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROWN, CAROLE, , ,

Mailing Address 136 ISLAND CREEK DRIVE

City
INDIAN RIVER SHORES

State
FL

Zip Code
32963

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2016

Transaction ID : SA11AI.4222

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURKE, ROBERT, , ,

Mailing Address 14935 LAKE FOREST DR.

City
LUTZ

State
FL

Zip Code
33559

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
METLIFE

Occupation (for Individual)
ACCOUNTANT

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : SA11AI.4310

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURROWS, GREG, , ,

Mailing Address 1335 JASMINE DR

City
LEWISVILLE

State
TX

Zip Code
75077

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 22 / 2016

Transaction ID : SA11AI.4114

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARGILL, DAVID, , ,

Mailing Address 2628 BRENTSHIRE DRIVE

City

TALLAHASSEE

State

FL

Zip Code

32303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

DACAR FIRE PROTECTION, INC.

Occupation (for Individual)

FIRE PROTECTION CONTRACTOR

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2016

Transaction ID : SA11AI.4232

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHURNETSKI, EDWARD, , ,

Mailing Address 11300 LANCASTER RIDGE DR

City

KNOXVILLE

State

TN

Zip Code

37932

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

UT-BATTELLE LLC

Occupation (for Individual)

ENGINEER

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11AI.4473

Amount of Each Receipt this Period

100.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLINS, MICHAEL, , ,

Mailing Address 14841 JONATHAN HARBOUR DRIVE

City

FORT MYERS

State

FL

Zip Code

33908

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

COLLINS VISION

Occupation (for Individual)

EYE SURGEON

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.4456

Amount of Each Receipt this Period

250.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

1350.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLLINS, MICHAEL, , ,

Mailing Address 14841 JONATHAN HARBOUR DRIVE

City
FORT MYERS

State
FL

Zip Code
33908

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLLINS VISION

Occupation (for Individual)
EYE SURGEON

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 13 / 2016

Transaction ID : SA11AI.4466

Amount of Each Receipt this Period

250.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEVERSE, FRANK, , ,

Mailing Address P. O. BOX 484

City
GLENBROOK

State
NV

Zip Code
89413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : SA11AI.4298

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GLASSMAN, DAVID, , ,

Mailing Address 3055 HARBOR DRIVE

City
FT. LAUDERDALE

State
FL

Zip Code
33316

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.4522

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOTT, DENISE, , ,

Mailing Address 1411 ROSEWOOD AVE
 SUITE 207

City
 CLEVELAND

State
 OH

Zip Code
 44107

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 ACSIA PARTNERS

Occupation (for Individual)
 CEO

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 28 / 2016

Transaction ID : SA11AI.4274

Amount of Each Receipt this Period

250.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREEN, BENSON, , ,

Mailing Address 5402 TOWER ROAD

City
 TALLAHASSEE

State
 FL

Zip Code
 32303

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 BENSONS HEATING AND AIR CONDITIONING I

Occupation (for Individual)
 PRESIDENT

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 22 / 2016

Transaction ID : SA11AI.4156

Amount of Each Receipt this Period

250.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRIFFIN, EDWARD, , ,

Mailing Address 9512 MUSSORIE CR

City
 NAPLES

State
 FL

Zip Code
 34114

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RETIRED

Occupation (for Individual)
 RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 25 / 2016

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period

250.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRIFFIN, EDWARD, , ,

Mailing Address 9512 MUSSORIE CR

City
NAPLES

State
FL

Zip Code
34114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2016

Transaction ID : SA11AI.4509

Amount of Each Receipt this Period

250.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALEY, JANET, , ,

Mailing Address 1429 NW 122ND TERRACE

City

PEMBROKE PINES

State

FL

Zip Code

33026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11AI.4439

Amount of Each Receipt this Period

500.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUNTER, STILL, , ,

Mailing Address 5900 N ANDREWS AVENUE
SUITE 100

City

FORT LAUDERDALE

State

FL

Zip Code

33309

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
SALES

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : SA11AI.4264

Amount of Each Receipt this Period

500.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JACOBSON, LARRY, , ,

Mailing Address 4151 GULF SHORE BLVD N
SUITE 1001

City
NAPLES

State
FL

Zip Code
34103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
REAL ESTATE

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : SA11AI.4262

Amount of Each Receipt this Period

500.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLER, SCOTT, , ,

Mailing Address 500 N MARKETPLACE DR. #101
#101

City
CENTERVILLE

State
UT

Zip Code
84014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KELLER INVESTMENT PROPERTIES

Occupation (for Individual)
PRESIDENT/CEO

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11AI.4465

Amount of Each Receipt this Period

20000.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELLER, SCOTT, , ,

Mailing Address 500 N MARKETPLACE DR. #101
#101

City
CENTERVILLE

State
UT

Zip Code
84014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KELLER INVESTMENT PROPERTIES

Occupation (for Individual)
PRESIDENT/CEO

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.4485

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KOSTYRA, RICHARD, , ,

Mailing Address 10 SEAGATE DRIVE
APT 8N

City
NAPLES

State
FL

Zip Code
34103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.4459

Amount of Each Receipt this Period

250.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYNCH, DENNIS, , ,

Mailing Address 15226 BURNAVY DR

City
NAPLES

State
FL

Zip Code
34110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11AI.4461

Amount of Each Receipt this Period

250.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, JONNY, , ,

Mailing Address PO BOX 350579

City
JACKSONVILLE

State
FL

Zip Code
32235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOORE ELECTRICAL CONTRACTORS INC

Occupation (for Individual)
ELECTRICAL CONTRACTOR

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : SA11AI.4302

Amount of Each Receipt this Period

500.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ONEILL, CHRISTINE, , ,

Mailing Address 10993JACK NICKLAUS DRIVE

City
NORTH PALM BEACH

State
FL

Zip Code
33408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.4475

Amount of Each Receipt this Period

250.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, JAMES, , ,

Mailing Address 7130 E BELMONT AVE

City
PARADISE VALLEY

State
AZ

Zip Code
85253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
HOSPITALITY CONSULTANT

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 23 / 2016

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period

250.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STREATER, MARK, , ,

Mailing Address 7275 HENDRY CREEK DR.

City
FORT MYERS

State
FL

Zip Code
33908

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SW FLORIDA ORAL FACIAL SURGERY

Occupation (for Individual)
ORAL SURGEON

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11AI.4503

Amount of Each Receipt this Period

100.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

600.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TARSEY, RUPERT, , ,

Mailing Address 6725 NW 122 AVENUE

City
PARKLAND

State
FL

Zip Code
33076

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.4520

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRAINA, DOUGLAS, , ,

Mailing Address 3455 PINE RIDGE RD

City
NALES

State
FL

Zip Code
34109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
T.E.I.

Occupation (for Individual)
CEO

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 22 / 2016

Transaction ID : SA11AI.4136

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VASSALLUZZO, JOSEPH, , ,

Mailing Address 2200 CHERRY PALM ROAD

City
BOCA RATON

State
FL

Zip Code
33432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
REAL ESTATE

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 22 / 2016

Transaction ID : SA11AI.4120

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VILLALON, RADAMES, , ,

Mailing Address 10245 COLLINS AVE 7 F

City

BAL HARBOUR

State

FL

Zip Code

33154

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

HOMYN ENTERPRISES CORP

Occupation (for Individual)

MANAGER

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : SA11AI.4280

Amount of Each Receipt this Period

500.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

500.00

TOTAL This Period (last page this line number only)..... ►

41450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KAREN HARRINGTON FOR CONGRESS, INC.

Mailing Address 2000 NW 150TH AVE
SUITE 2120

City
PEMBROKE PINES

State
FL

Zip Code
33028

FEC ID number of contributing
federal political committee.

C C00474478

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

08 / **15** / **2016**

Transaction ID : SA11C.4600

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

2500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 23

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name (Last, First, Middle Initial)

A. BM EVENTS

Mailing Address 705 SW 5 AVENUE

City
MIAMIState
FLZip Code
33130Purpose of Disbursement
EVENT PREPARATION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | 1 | 5 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C**Transaction ID : SB21B.4553**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DONATE BUCKET

Mailing Address 1779 NORTH UNIVERSITY DRIVE

City
PEMBROKE PINESState
FLZip Code
33024Purpose of Disbursement
CC PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 | | | 3 | 0 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C**Transaction ID : SB21B.4583**

Amount of Each Disbursement this Period

2516.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GROUNDSWELL STRATEGIESMailing Address 5246 SW 8 STREET
SUITE 205-DCity
MIAMIState
FLZip Code
33134Purpose of Disbursement
POLITICAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 | | | 0 | 1 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C**Transaction ID : SB21B.4558**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6016.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 23

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY

Full Name (Last, First, Middle Initial)

A. NOVA

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 01 | | 2016 |

Mailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
VOTER MOBILIZATION

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.4555**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NOVA

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 01 | | 2016 |

Mailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
VOTER MOBILIZATION

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.4557**

Amount of Each Disbursement this Period

1750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. YOLO

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 12 | | 2016 |

Mailing Address 333 E. LAS OLAS BLVD

City
FT. LAUDERDALEState
FLZip Code
33301Purpose of Disbursement
FUNDRAISING EVENT

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.4552**

Amount of Each Disbursement this Period

1272.45

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4522.45

10538.60

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 20 OF 23
 FOR LINE 24 OF FORM 3X

| | |
|---|---|
| NAME OF COMMITTEE (In Full) TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY | FEC IDENTIFICATION NUMBER ▼ C C00622159 |
|---|---|

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | | | |
|---|-------------|---|--|
| Full Name of Payee FACEBOOK <input type="checkbox"/> Memo Item | | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2016 |
| Mailing Address 1 HACKER WAY | | | Amount 35.18 |
| City MENLO PARK | State CA | Zip Code 94025 | |
| Purpose of Expenditure ADVERTISING | | Category/ Type | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 01 / 2016 |
| Name of Federal Candidate: TRUMP, DONALD J., , , | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 1997.37 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|---|-------------|---|--|
| Full Name of Payee LP STRATEGIES <input type="checkbox"/> Memo Item | | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 16 / 2016 |
| Mailing Address 5246 SW 8 STREET | | | Amount 1737.19 |
| City MIAMI | State FL | Zip Code 33134 | |
| Purpose of Expenditure PARAMOUNT COMMUNICATIONS | | Category/ Type | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 16 / 2016 |
| Name of Federal Candidate: TRUMP, DONALD J., , , | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 1737.19 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | |
|---|---|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures | ▶ | 1772.37 |
| (a) SUBTOTAL of Unitemized Independent Expenditures | ▶ | |
| (a) TOTAL Independent Expenditures | ▶ | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

RIESCO, JOSE, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 23 OF 23
 FOR LINE 24 OF FORM 3X

| | |
|---|---|
| NAME OF COMMITTEE (In Full) TRUMP-TOGETHER, READY & UNITED, FOR MORE PROSPERITY | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00622159 </div> |
|---|---|

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

| | | | | | |
|--|-------------|-------------------|--|--|--|
| Full Name of Payee TWITTER | | | <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div> | |
| Mailing Address 1355 MARKET STREET SUITE 900 | | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">40.00</div> | | |
| City SAN FRANCISCO | State CA | Zip Code 94103 | | | |
| Purpose of Expenditure ADVERTISING | | Category/ Type | Transaction ID : SE.4582 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div> | | |
| Name of Federal Candidate: TRUMP, DONALD J., , | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; text-align: right;">4739.80</div> | | |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ | | | 2016 | | |

| | | | | | |
|---|-------|-------------------|---|--|--|
| Full Name of Payee | | | <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div> | |
| Mailing Address | | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> | | |
| City | State | Zip Code | | | |
| Purpose of Expenditure | | Category/ Type | Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div> | | |
| Name of Federal Candidate: | | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ | | | 2016 | | |

| | | |
|---|---|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures | ▶ | 40.00 |
| (a) SUBTOTAL of Unitemized Independent Expenditures | ▶ | |
| (a) TOTAL Independent Expenditures | ▶ | 4739.80 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

RIESCO, JOSE, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature